

Grant Agreement with No Prepayments  
Page 17 of 17

## SIGNATORIES TO THIS AGREEMENT

  
GRANTEE's Authorized Representative  
April Haverty, JD  
Director, Grants and Contracts

11/30/2015  
Date

Agency DUNS No. 937639060

## **CARS PAYMENT INFORMATION**

The information below is used by the DHS's Bureau of Fiscal Services, CARS Unit to facilitate the processing and recording of payments made under this Agreement.

**Agency Name:** Medical College of Wisconsin

Grant Agreement #, if applicable: 30215

**Total Grant Agreement Amount:**  
**\$845,849**

**There will be no pre-payments issued with this contract.**

**Match Required:** No    If Yes, Profile ID# **Amount:** \$

F-00766 (07/2015)